



ST. THOMAS CSI CHURCH BELFAST

A registered charity in Northern Ireland (NIC107503)

MEMBERSHIP FORM

In an attempt to bring our official church membership role up to date with correct information, could you please fill this form to the best of your ability. Each individual family should fill out a separate form and the information you provide will be kept confidential.

FAMILY MEMBERS

- 1) Fullname: _____ Gender: Male Female DOB: ___/___/___
- 2) Fullname: _____ Gender: Male Female DOB: ___/___/___
- 3) Fullname: _____ Gender: Male Female DOB: ___/___/___
- 4) Fullname: _____ Gender: Male Female DOB: ___/___/___

WEDDING ANNIVERSARY

Date of marriage: ___/___/___

HOME ADDRESS

Address: _____

City: _____ Postcode _____

Mobile Number: _____ Home Number: _____

Email: _____

Mother Parish in India: _____

Under the General Data Protection Regulation there are occasions when **ST Thomas CSI Church Belfast** must obtain your explicit consent to use your information. Personal Data includes, but is not limited to your name, address, telephone number and email address. **ST Thomas CSI Church Belfast** would like to hold and use your information for the purposes set out by the General body. You can change your consent preferences or withdraw your consent completely by contacting the Secretary of ST Thomas CSI Church. The use of your information will cease immediately except where we are required by law or under the terms of a contract to use your information. All individuals above 18 years of age must sign this document. Signing this means all parties involved consent to **ST Thomas CSI Church Belfast** to use my data for the purpose of birthdays, wedding anniversaries and other church related matters.

Signature/s: _____

Date: _____